

# Home Care Services Quarterly Webinar

February 27, 2019

# Objectives

- Provide updates and statistics
- Provide clarification on the transfer process
- Provide clarification on the HCA training requirements
- Provide an overview on the various HCA Registry statuses

# Updates

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- FAQs
- Regulations
- Complaint Process
- IVR Phase II
- SB 1343 - Sexual Harassment Training Requirements
- AB 2455 - Disclosure of personal HCA contact information
- Reminders
  - Forms being updated (HCS 100, HCS 101, HCS 9183, HCS 9184)
  - New Mail Station and Fax number
    - Fax number: (916) 651-5600
    - Mail Station: MS 9-14-90
  - Vacant caseload
    - The Officer of the Day (OD) will assist with questions until your HCO has been assigned an analyst

# Statistics

# HCO and HCA Statistics

The below statistics are based on data from implementation to January 31, 2019:

## Home Care Organizations

- Applications Received: **2,000+**
- Pending Applications: **90+**
- Applications Denied: **25+**
- Currently Licensed: **1,500+**
- Conditional Licenses: **3+**
- License Closures: **400+**
- HCO Renewals: **1,000+**
- Visits Completed: **1,600+**

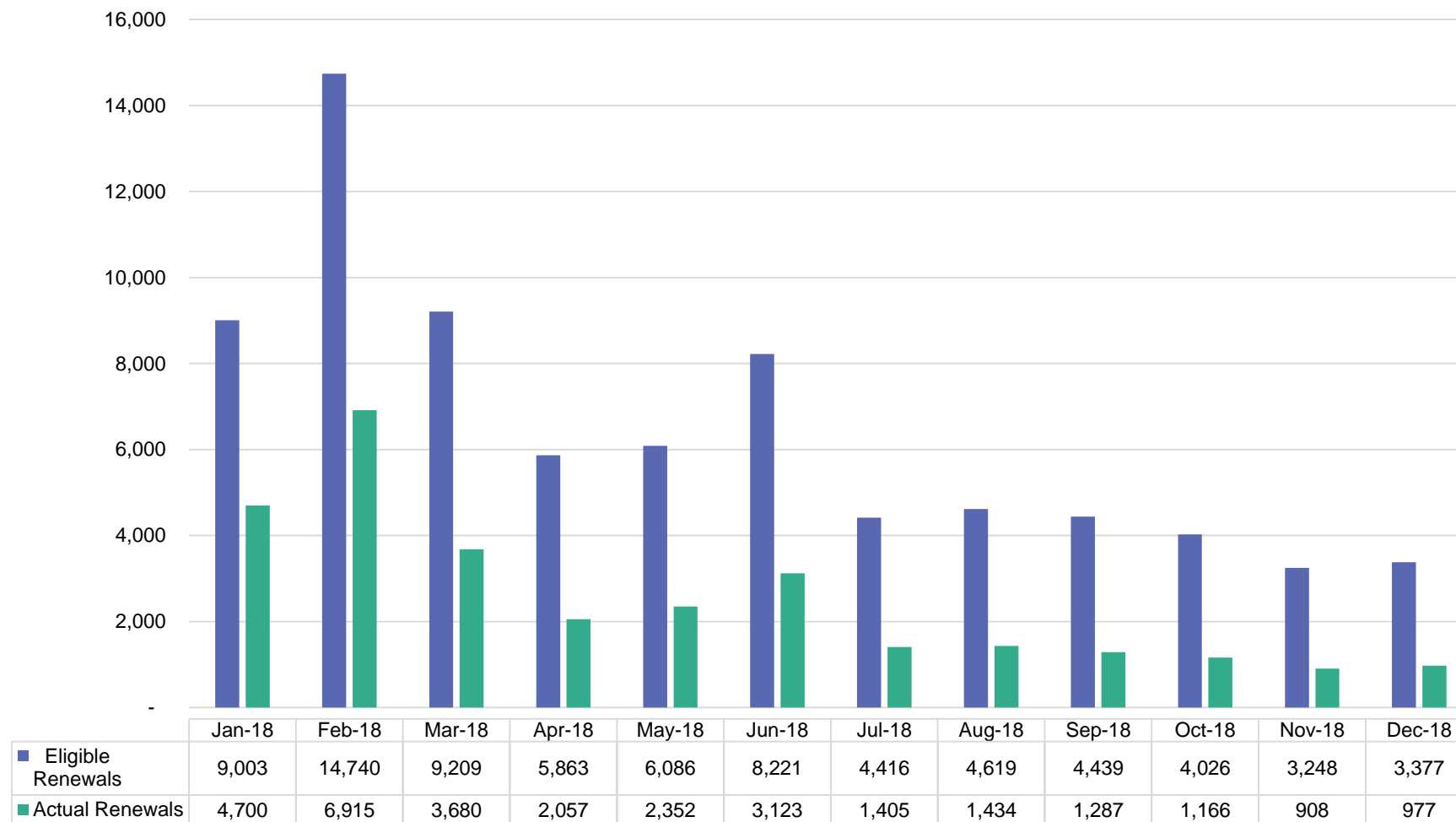
## Home Care Aides

- Applications Received: **192,000+**
- HCAs Pending: **4,700+**
- HCAs either Denied, Revoked, Closed, or Forfeited: **74,500+**
- Currently Registered: **113,000+**

# HCA Renewal Statistics



HCA Eligible Renewals vs Actual Renewals by Month



# HCSB Phone Statistics

The below statistics are based on calls for 2018 and 2019:

## Calls Routed to Staff

- 2018 statistics
  - 1<sup>st</sup> Quarter: **27,700+**
  - 2<sup>nd</sup> Quarter: **25,100+**
  - 3<sup>rd</sup> Quarter: **22,300+**
  - 4<sup>th</sup> Quarter: **20,200+**
- 2019 statistics
  - January: **7,100+**

## Calls Routed to IVR

- 2018 statistics (IVR implemented end of February 2018)
  - 1<sup>st</sup> Quarter: **9,200+**
  - 2<sup>nd</sup> Quarter: **21,600+**
  - 3<sup>rd</sup> Quarter: **19,100+**
  - 4<sup>th</sup> Quarter: **17,000+**
- 2019 statistics
  - January: **6,400+**



# Transfers

# Clearance Transfers

- Accepted via mail, fax to (916) 651-5600, or new email address [FaxHCSB@dss.ca.gov](mailto:FaxHCSB@dss.ca.gov)
  - This email was created to alleviate issues experienced with Fax Machine
  - No responses will be sent from this email box
- HCS 9183 may **only** be utilized for HCAs with straight clearances (no exemption required)
  - HCSB recommends sending one form to associate multiple individuals at one time vs. one form for each individual
- Transfers are only processed when complete
  - Must include copy of valid photo ID
  - Must have signature
  - Extra documents not required
- HCSB **cannot** process transfers for HCAs who have exemptions approved or in process
  - These requests must be faxed on the LIC 9188 to the Caregiver Background Check Bureau (CBCB) at 916-754-4589
- If an association is received incomplete or received on the HCS 9183 for an exemption, it will not be processed, and HCSB will not notify you.

<http://www.cdss.ca.gov/inforesources/Forms-Brochures/Forms-Alphabetic-List/E-H>

- Only for clearances
- Include copy of Photo IDs
- LIC 508s are not required
- Consolidate HCAs
- Sign it!

The Home Care Organization (HCO) Association Request may only be used to request a criminal record clearance transfer between California Department of Social Services' licensed organizations/facilities and/or Trustline. Please fax this completed request, along with copies of driver's license or other valid photo I.D. for each individual listed, to (916) 322-6310 or mail to: California Department of Social Services, Home Care Services Bureau, 744 P Street, MS T8-3-90, Sacramento, CA 95814. If driver's license or photo I.D. is not submitted, the transfer will not be completed.

HOME CARE ORGANIZATION INFORMATION	
HOME CARE ORGANIZATION NAME	HOME CARE ORGANIZATION NUMBER
REPRESENTATIVE NAME	AREA CODE/TELEPHONE (     )

[illegible]

HOME CARE ORGANIZATION REPRESENTATIVE SIGNATURE	DATE
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# Exemption Transfers

- Only able to accept via mail or fax to CBCB: (916) 754-4589
- Transfers are only processed when complete
  - Must include valid photo ID
  - **MUST** include LIC 508
  - Must have signature
- CBCB **will only** process transfers on the LIC 9188 form
- HCSB does not forward exemption transfer to CBCB

# LIC 9188 (Exemption Transfers)

<http://www.cdss.ca.gov/inforesources/Forms-Brochures/Forms-Alphabetic-List/I-L>

- Required for exemptions
- Include copy of Photo IDs
- LIC 508 **required**
- Sign it!

## CRIMINAL RECORD EXEMPTION TRANSFER REQUEST

Active criminal record exemptions may be transferred from one state licensed facility/organization to another by a license applicant or licensee. The transfer must be approved by the Department before the individual who is the subject of the transfer has client contact or the facility/organization will be in violation of the law and subject to a \$100 civil penalty.

The license applicant or licensee who is seeking the exemption transfer must provide a LIC 508, and verify the individual's identity and include a copy of the person's driver's license, permanent resident card or a valid photo identification issued by the California Department of Motor Vehicles or by another state or the United States government if the person is not a California resident. Additionally, a Child Abuse Central Index (CACI) check form must be submitted if the exemption transfer is to a facility serving children and the individual has not previously submitted a CACI check form or the date of the previous CACI inquiry was made prior to January 1, 1999. The CACI check form must be mailed directly to the Department of Justice with the applicable fee.

This form may only be used to request an exemption transfer between state licensed facilities/organizations. To request a transfer between county and state licensed facilities, the requesting Licensing Agency must contact their county liaison.

PLEASE TYPE OR PRINT LEGIBLY		DATE:
<b>PLEASE TRANSFER THE CRIMINAL RECORD EXEMPTION FOR:</b>		
LAST NAME	FIRST NAME	MIDDLE INITIAL
CA DRIVER'S LICENSE or ID #/PERMANENT RESIDENT ID (I-551):		DOB:
LICENSING INFORMATION SYSTEM ID #:		SSN: (OPTIONAL)
<b>FROM THE FOLLOWING FACILITY/ORGANIZATION:</b>		
NAME OF FACILITY/ORGANIZATION:		FACILITY/ORGANIZATION NUMBER:
STREET ADDRESS:		
CITY	STATE	ZIP CODE
<b>TO THE FOLLOWING FACILITY/ORGANIZATION:</b>		
NAME OF FACILITY/ORGANIZATION:		<b>Transferee Association Type</b> <input type="checkbox"/> Facility Administrator <input type="checkbox"/> Corporation Board Member <input type="checkbox"/> Employee <input type="checkbox"/> Certified Home <input type="checkbox"/> Licensee/Applicant <input type="checkbox"/> Non-client Adult Resident <input type="checkbox"/> Partnership Member <input type="checkbox"/> Spouse of Licensee <input type="checkbox"/> Affiliated Home Care Aide Title (licensee, administrator, director)
FACILITY/ORGANIZATION NUMBER:	DATE OF EMPLOYMENT:	
STREET ADDRESS:		
CITY	STATE ZIP CODE	
<i>I certify I have verified the above individual's identity and have enclosed a copy of the individual's LIC 508 and photo I.D.</i>		
Signature		
<b>FOR DISTRICT OFFICE USE ONLY</b>		
DATE OF EXEMPTION TRANSFER ENTRY:		INITIAL OF PERSON ENTERING TRANSFER:

# Disassociations

- Any notification in writing
- HCSB will only process disassociations for HCAs who are **not** pending an exemption or pending an exemption transfer
- If an HCA is pending an exemption or an exemption transfer, CBCB will need to process the request
  - Please mail or fax to CBCB: (916) 754-4589

<http://www.cdss.ca.gov/inforesources/Forms-Brochures/Forms-Alphabetic-List/E-H>

- ## HOME CARE ORGANIZATION **DISASSOCIATION** REQUEST

The Home Care Organization (HCO) Disassociation Request may only be used to request the disassociation of a home care aide or an employee from your HCO. Please fax this form to (916) 322-6310 or mail to: California Department of Social Services, Home Care Services Bureau, 744 P Street, MS T8-3-90, Sacramento, CA 95814.

HOME CARE ORGANIZATION INFORMATION	
HOME CARE ORGANIZATION NAME	HOME CARE ORGANIZATION NUMBER
REPRESENTATIVE NAME	AREA CODE/TELEPHONE (      )

[illegible]

<b>I DECLARE UNDER PENALTY OF PERJURY THAT THE STATEMENTS ON THIS FORM ARE CORRECT TO THE BEST OF MY KNOWLEDGE.</b>	
HOME CARE ORGANIZATION REPRESENTATIVE SIGNATURE	DATE

# Training



# Training Timeline

- Depending on **hire date** and training date, training may be transferred between organizations (HCO to HCO).
- Per regulations:
  - The five (5) hours of entry level training as set forth in Subdivision (b) of Section 1796.44 of the Health and Safety Code shall be completed after affiliation and **hire date** to the Home Care Organization **but prior to presence with clients**.
  - New/hiring HCO must have all the information needed to complete the training log and the HCA must provide proof of completion (a certificate, a sign in sheet, etc.).

HCA Hired at  
Organization A on  
January 1, 2019



Training taken on  
January 9, 2019



HCA Hired at  
Organization B on  
January 29, 2019

This training is **only valid** for  
HCO A, as the training was  
taken prior to hire date with  
HCO B.

HCA Hired at  
Organization A on  
January 1, 2019



HCA Hired at  
Organization B on  
January 29, 2019



Training taken on  
February 1, 2019

This training is transferrable  
between both organizations,  
as the training was after hire  
date

Training taken on  
January 1, 2019



HCA Hired at  
Organization B on  
January 15, 2019



HCA Hired at  
Organization B on  
January 19, 2019

This training is not  
transferrable to either HCO

## Entry Level

### **2 hours must include:**

- Orientation from the HCO

### **3 hours must include:**

- Standard Precautions
- Infection Control
- Emergency Procedures

**Can also cover additional topics!**

Entry Level Training has to be completed before contact with clients.

## Year 1 Annual Training

### **At a minimum, the 5 hours must include:**

- Client's Rights & Safety
- Providing for and responding to client's needs
- Reporting detecting, preventing abuse and neglect
- Assisting clients with personal hygiene & other home care services
- How to properly transport a client

**Can also cover additional topics!**

Annual Training has to be completed after the HCA is hired and within each year (from **hire date**) and include all 5 topics above but can include other topics as well.

## Year 2 Annual Training

### **At a minimum, the 5 hours must include**

- Client's Rights & Safety
- Providing for and responding to client's needs
- Reporting detecting, preventing abuse and neglect
- Assisting clients with personal hygiene & other home care services
- How to properly transport a client

**Additional topics are encouraged!**

# Training Timeline (cont'd)

- At a minimum, training must include statutorily required topics; however, it may include other topics as well.
  - Initial training requires: Three hours of safety training, including basic safety precautions, emergency procedures, and infection control.
  - Annual training requires: Clients' rights and safety; How to provide for, and respond to, a client's daily living needs; How to report, prevent, and detect abuse and neglect; How to assist a client with personal hygiene and other home care services; If transportation services are provided, how to safely transport a client.
- Although those topics are required to be covered, the entire duration is not required to cover ONLY those. This law was created this way to allow flexibility for the HCO's to tailor training to fit their guidelines and standards.

# TB Timeline



Per Health and Safety Code Section 1796.45 (f): An affiliated home care aide who transfers employment from one home care organization to another shall be deemed to meet the requirements of subdivision (a) or (c) **if the affiliated home care aide can produce a certificate showing that he or she submitted to the examination within the past two years and was found to be free of active tuberculosis disease**, or if it is verified by the home care organization previously employing him or her that it has a certificate on file that contains that showing and a copy of the certificate is provided to the new home care organization prior to the affiliated home care aide beginning employment.

For HCA's who test positive on a skin test: Once an affiliated home care aide has a documented positive test for tuberculosis infection that has been followed by an X-ray, the examination is no longer required.

# HCA Status Overview

# HCA Status Overview

- **Closed-** This status is listed when a HCA has not completed the application process. A new application is required and a new LiveScan may be required in some circumstances.
- **Registered-** This status is listed when a HCA has a clear background or an exemption granted and has completed the application through HCSB to become a HCA.
- **Pending-** This status is listed when a HCA has not completed the application process. They may be missing the application, they may be missing fingerprints, or they may be pending an exemption.
- **Denied-** This status is listed when a HCA has been denied an exemption and has finished their legal case. They are not eligible to apply for the HCA registry for two years upon a denial.
- **Forfeited-** This status is listed when a HCA does not renew their registration before their expiration date. A new application is required for them to become registered again.
- **Revoked-** This status is listed when a HCA's registration has been revoked, and their legal case is finished. They are not eligible to apply for the HCA registry for two years upon a revocation.
- **Registered- Pending Review-** This status is listed when the HCA has a criminal history or action from the Department that is being reviewed. They are not able to be working.
- **Registered\*-** This status is listed when the HCA has an exemption granted by the Department.

# References

- Home Care Services Bureau  
<http://www.cdss.ca.gov/inforesources/Community-Care/Home-Care-Services>
- Caregiver Background Check Bureau  
<http://www.cdss.ca.gov/inforesources/Community-Care/Caregiver-Background-Check/Background-Check-Process>
- Health and Safety Code  
[http://leginfo.legislature.ca.gov/faces/codes\\_displayexpandedbranch.xhtml?tocCode=HSC&division=2.&title=&part=&chapter=13.&article](http://leginfo.legislature.ca.gov/faces/codes_displayexpandedbranch.xhtml?tocCode=HSC&division=2.&title=&part=&chapter=13.&article)
- Regulations  
<http://www.cdss.ca.gov/inforesources/Letters-Regulations/Legislation-and-Regulations/Community-Care-Licensing-Regulations/Home-Care-Services-Consumer-Protection>



# Contact Us

For more information regarding the Home Care Services Consumer Protection Act, please contact the Home Care Services Bureau by e-mail at [HCSB@dss.ca.gov](mailto:HCSB@dss.ca.gov) or by telephone at (877) 424-5778.